2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#753506

FILED Mar 19, 2009 Secretary of State

Entity Name: SUNSET COVE ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 8567 W GULF BLVD #23N TREASURE ISLAND, FL 33706 **Current Mailing Address: New Mailing Address:** 250-104TH AVE C/O LAMONT TREASURE ISLAND, FL 337064846 US FEI Number: 59-1727838 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SUE LAMONT/LAMONT MANAGEMENT 250 104TH AVE TREASURE ISLAND, FL 33706 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition TUTKO, TOM TUTKO, TOM Name: Name: 8567 W. GULF BLVD 28N Address: 8567 W. GULF BLVD 28N Address: City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: TREASURE ISLAND, FL 33706 Title: PD Title: () Delete () Change () Addition BROWNING, BILL Name: Name: Address: 8567 W GULF BLVD 14 N Address: City-St-Zip: TREASURE ISLAND, FL City-St-Zip: Title: TD () Delete Title: () Change () Addition FISH, JOHN Name: Name: 8565 W GULF BLVD., #205 Address: Address: City-St-Zip: TREASURE ISLAND, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: MAXEMUIK, MARGERY Name: Address: 1782 POWER LINE RD RR#2 Address: City-St-Zip: LYNDEN ONTARIO, CA LORITO City-St-Zip: Title: () Delete Title: () Change () Addition MENZIES, GEORGE Name: Name: 8567 W GULF BLVD 5N Address: Address: City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN FISH T 03/19/2009